

COMBINED DECLARATION AND POWER OF ATTORNEY

As below named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name,

I believe I am the original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled **LEVERAGE MARGIN MONITORING AND MANAGEMENT** specification of which

- ☒ is attached hereto.
- ☐ was filed on _____ as Application Serial No. _____ and was amended on _____.
- ☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amended referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulation, § 1.56.

And I hereby appoint John E. Kidd, Reg. No. 19,916; Victor Siber, Reg. No. 25,149, Michael J. Pantuliano, Reg. No. 18,971; Margaret B. Kelley, Reg. No. 29,181; Philip E. Roux, Reg. No. 31,295; C. Joseph Laughon, II, Reg. No. 31,389; Leora Ben-Ami, Reg. No. 32,455; Robert D. Schaffer, Reg. No. 33,775; Michael A. O'Shea, Reg. No. 35,631; Joel N. Bock, Reg. No. 36,456; Gerard P. Norton, Reg. No. 36,621; John T. Johnson, Reg. No. 37,363; Victor Geraci, Reg. No. 38,157; Frank Cimino, Reg. No. 39,945; Joseph E. Levi, Reg. No. 41,152; Nada Jain, Reg. No. 41,431; James V. Mahon, Reg. No. 41,966; Frank J. Nuzzi, Reg. No. 42,944; David F. Ries, Reg. No. 43,046; Joseph P. Kincart, Reg. No. 43,716 all of the firm of Clifford Chance Rogers & Wells, 200 Park Avenue, New York, New York, 10166-0153 my attorney with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to Joseph P. Kincart, Clifford Chance Rogers & Wells LLP, 200 Park Avenue, New York, NY 10166 (212) 878-3289.

I hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name Of Inventor: Robert Rademacher

Inventor's Signature: _____ Date: _____

Residence Address _____

Citizen Of: _____

Post Office Address: _____

Full Name Of Inventor: David Adkisson

Inventor's Signature: _____ Date: _____

Residence Address _____

Citizen Of: _____

Post Office Address: _____

Full Name Of Inventor: David Maloy

Inventor's Signature: _____ Date: _____

Residence Address _____

Citizen Of: _____

Post Office Address: _____

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